

U.S. DISTRICT COURT, SOUTHERN DISTRICT OF OHIO
EASTERN DIVISION

DAVID E. WADE
c/o Florey Todd, LTD.
5 E. Long Street, Suite 600
Columbus, OH 43215

Plaintiff,

vs.

Case No.: _____

FRANKLIN COUNTY, OHIO
c/o Franklin County Prosecutor
373 S High St, Suite 14
Columbus, OH 43215

Judge: _____

and

COMPLAINT

FRANKLIN COUNTY SHERIFF'S OFFICE
c/o Franklin County Prosecutor
373 S High St, Suite 14
Columbus, OH 43215

JURY DEMAND ENDORSED HEREON

and

NICHOLAS BATES,
In His Individual And Official Capacities as
Employee of Franklin County Sheriff
c/o Franklin County Prosecutor
373 S High St, Suite 14
Columbus, OH 43215

and

LESS LETHAL, LLC
c/o Richard E. Juler, Statutory Agent
5463 Palisades Drive
Cincinnati, Ohio 45238

and

NOVA SECURITY GROUP, INC.
c/o Northwest Registered Agent Svc Inc
212 W. Troy Street, Ste B
Dothan, AL 36303

Defendants.

COMPLAINT

Now comes Plaintiff, David Wade, and for his Complaint against Defendants, Franklin County, Ohio, Franklin County Sheriff, Dallas Baldwin, Nicholas Bates, Less Lethal, LLC and Nova Security Group, Inc., hereby states as follows:

PARTIES, JURISDICTION, AND VENUE

1. Plaintiff, David E. Wade (“Mr. Wade”), is an individual, residing in Ross County, Ohio.

2. Defendant, Franklin County, Ohio (“Franklin County”), is a political subdivision created and authorized under the laws of the State of Ohio.

3. Defendant, Franklin County Sheriff’s Office (“Franklin County Sherriff”), is the chief law enforcement office and agency of Franklin County.

4. At all relevant times hereto, Franklin County established the regulations, customs, policies, and practices followed by Franklin County Sheriff and was responsibility for the organization, maintenance, operation, staffing, and supervision of the Franklin County Sheriff’s department.

5. Upon information and belief, Defendant, Nicholas Bates (“Deputy Bates”), is an individual residing in Franklin County, Ohio, and at all relevant times, was an employee and duly sworn deputy or officer of the Franklin County Sheriff.

6. Upon information and belief, Defendant, Less Lethal, LLC (“Less Lethal”), is an Ohio limited liability company with its principal place of business in Hamilton County, Ohio, and conducts business throughout the State of Ohio, including Franklin County, Ohio.

7. Upon information and belief, Defendant, Nova Security Group, Inc. (“Nova”), is

an Alabama corporation with its principal place of business in Dothan, Alabama, but which conducts business in the State of Ohio, and specifically places products in the stream of interstate commerce, that are sold and used in the State of Ohio.

8. This Court has jurisdiction over Plaintiff's claims because issues of federal law pervade and Plaintiff seeks monetary damages against Defendants for violation of rights guaranteed by the United States Constitution and federal law.

FACTUAL ALLEGATIONS COMMON TO ALL CAUSES OF ACTION

SUMMARY OF INCIDENT

9. On or about October 22, 2019, Mr. Wade was in the custody of the Franklin County Sheriff's Office while criminal charges against him were pending in a case before the Franklin County Common Pleas Court (the "Court"), styled *State of Ohio v. David Wade*, and assigned Case No. 19 CR 001984.

10. Mr. Wade invoked his constitutionally-protected right to represent himself and serve as his own lawyer during a trial (the "Trial") that began on October 22, 2019.

11. As a condition to self-representation, the Court ordered Mr. Wade to wear a Nova R.A.C.C. stun belt (the "Stun Belt") during the Trial.

12. The Stun Belt was designed to be activated by a remote-control device.

13. During a recess of the Trial, Deputy Bates took the remote control out of the courtroom, into a restroom and dropped the control into a toilet, after which the Stun Belt locked to Mr. Wade and shot 50,000 volts of electricity through his body for three, uninterrupted minutes (the "Violation").

14. The Stun Belt is an inherently dangerous instrumentality and Mr. Wade prays in this Complaint that the Court permanently enjoin the Franklin County Sheriff from using it and other products like it and to permanently enjoin Less Lethal and Nova from selling and/or

distributing the Stun Belt and other products like it.

PURPOSE AND USE OF THE NOVA R.A.C.C. STUN BELT

15. Although innocent until proven guilty, and although customarily only used when a defendant or incarcerated individual presents a danger to the court, or during transport of individuals who pose a flight risk, Mr. Wade was ordered to wear the Stun Belt as a means to control him during the Trial.

16. Mr. Wade had no history of, and was not a flight risk.

17. Mr. Wade had not history of poor behavior during court proceedings.

18. Mr. Wade did not present a danger to the Court.

19. There was no finding or order of the Court that Mr. Wade, in representing himself at the Trial, presented a flight risk or was a danger to the Court.

NO WARNINGS OR WAIVER

20. The Franklin County Sheriff did not give Mr. Wade any written instructions or warnings regarding the Stun Belt.

21. The Franklin County Sheriff did not give Mr. Wade any oral instructions or warnings regarding the Stun Belt.

22. The Franklin County Sheriff did not give Mr. Wade any information or warning regarding the Stun Belt, including, but not limited to information and warnings related to use of the Stun Belt, its properties, and/or potential risks.

23. The Franklin County Sheriff was not in possession of, and did not request, any information regarding Mr. Wade's health to safeguard against risks specific to Mr. Wade in the use and application of the Stun Belt.

24. The Franklin County Sheriff typically requires any individual compelled to wear

a stun belt provide a written waiver executing Franklin County and the Franklin County Sheriff's Office from any liability for harm caused by a stun belt.

25. The Franklin County Sheriff's personnel and/or deputies did not present a waiver form to Mr. Wade.

26. The Franklin County Sheriff's personnel and/or deputies did not request that Mr. Wade sign a waiver.

27. Mr. Wade never signed a waiver form related to the Stun Belt that he was forced to wear.

28. Prior to being shocked, the only information Mr. Wade had regarding the Stun Belt was that he had to wear the Stun Belt in order to represent himself during the Trial.

29. Nevertheless, the Franklin County Sheriff strapped the Stun Belt directly to Mr. Wade's torso, secured the Stun Belt with a metal lock, and pocketed both the lock and remote control activator.

DESCRIPTION OF INCIDENT AND CONDUCT OF FRANKLIN COUNTY

30. Upon information and belief, during the Trial, Deputy Bates was in charge of and controlled the Stun Belt remote.

31. Upon information and belief, at the time of the Violation, Deputy Bates was in charge of and controlled the Stun Belt remote.

32. During a recess of the Trial, Deputy Bates went to the restroom.

33. When he went to the restroom, Deputy Bates did not pass custody of the Stun Belt remote to another deputy.

34. Instead, Deputy Bates took the Stun Belt remote to the bathroom with him and amazingly, dropped the remote into a toilet.

35. Instead of immediately removing the belt from Mr. Wade and securing him in some other fashion, Deputy Bates elected to leave the Stun Belt locked to Mr. Wade.

36. Surveillance footage shows that Deputy Bates considered it was funny that he had dropped the Stun Belt remote into a toilet.

37. Deputy Bates shared the joke with his fellow deputies, who he enlisted to help retrieve the remote from the toilet water.

38. Thereafter, the deputies dangerously retrieved the remote control from the toilet water while leaving the Stun Belt locked to Mr. Wade.

39. At the time of the Violation, Mr. Wade was quietly sitting in the courtroom, listening to recorded witness statements and preparing his defense for the Trial.

40. In contrast, surveillance footage shows Deputy Bates making vulgar gestures imitating the act of masturbating after he dropped the Stun Belt remote into the toilet.

41. In the process of removing the remote from the toilet and drying it off, the Stun Belt activated, sending at least 50,000 volts of electricity through Mr. Wade's body for a period of three, uninterrupted minutes.

42. The Franklin County Sheriff realized the situation was not a joke only after Mr. Wade was hit with 50,000 volts, causing grave injuries to Mr. Wade.

43. The Franklin County Sheriff's personnel and/or appointed deputies could not deactivate the Stun Belt.

44. The Stun Belt could not be removed from Mr. Wade's torso because the Franklin County Sheriff's personnel and/or appointed deputies lost the key to the Stun Belt lock.

45. Deputies ultimately removed the Stun Belt from Mr. Wade, which was still active and sending 50,000 volts through his body, by cutting it off with a knife.

46. During the Violation, Mr. Wade ended up on the floor of the courtroom writhing in pain and screaming, “What did I do? What did I do?”

47. Attached as Exhibit A is a true and accurate copy of an incident report (the “Incident Report”) of the Violation, prepared by and kept in the ordinary course of business by the Franklin County Sheriff.

EVENTS AFTER THE VIOLATION

48. Immediately after the incident, Mr. Wade complained of physical injury.

49. Pictures in the attached Incident Report show marks on Mr. Wade’s body resulting from the Violation, and serve as evidence of his injury.

50. The shocking incident was so severe that the Court declared a mistrial of Mr. Wade’s criminal proceedings.

51. The Franklin County Sheriff issued a written reprimand to Deputy Bates, finding his conduct worthy of discipline. A true and accurate copy of the written reprimand is attached as Exhibit B hereto.

ACTIONS OF LESS LETHAL AND NOVA

52. Less Lethal and Nova are affiliated entities, sharing common ownership and control.

53. Together, Less Lethal and Nova design, manufacturer, distribute, sell and/or otherwise place into the stream of commerce the Nova R.A.C.C. stun belts.

54. Upon information and belief, Less Lethal and Nova, together, provide training to law enforcement for use of the Nova R.A.C.C. stun belts

55. Upon information and belief, Less Lethal holds itself out as the exclusive supplier of the Nova R.A.C.C. stun belt and related products.

56. Upon information and belief, Franklin County purchased the Stun Belt, and other Nova R.A.C.C. stun belts, from Nova and/or Less Lethal.

57. Upon information and belief Nova and/or Less Lethal provided training and/or training materials to the Franklin County Sheriff's personnel and deputies.

58. Upon information and belief, Nova R.A.C.C. stun belts are programmed to apply a pulsing shock of approximately 10 millionths of a second.

59. Water is a commonly encountered substance.

60. Nova R.A.C.C. stun belts are advertised for use both indoors and outdoors, without limitation.

61. Yet if the Nova R.A.C.C. stun belt remote control comes into contact with water, the stun belt may malfunction such that the "shock" of 50,000-75,000 volts will continue uninterrupted for an indefinite period of time.

62. After the remote control kept by Deputy Bates came into contact with water, the Stun Belt malfunctioned such that a "shock" of at least 50,000 volts was applied to Mr. Wade for three, uninterrupted minutes.

INJURIES AND OTHER HARM TO WADE

63. Mr. Wade sustained serious and permanent personal injuries as a result of the Violation.

64. Mr. Wade sought medical treatment immediately after the Violation and continues to receive medical treatment while incarcerated.

65. Mr. Wade also suffers from post-traumatic stress disorder as a result of the Violation and battles ongoing, related anxiety and depression.

66. Mr. Wade's injuries include physical harm, mental anguish, and emotional

distress.

67. The personal injuries Mr. Wade sustained were a direct and proximate result of the Violation, are severe and permanent, and have disrupted Mr. Wade's life.

COUNT ONE: 42 U.S.C. § 1983
VIOLATION OF RIGHTS SECURED BY FOURTEENTH AMENDMENT
(Defendants Franklin County, Franklin County Sheriff, and Deputy Bates)

68. Plaintiff incorporates the statements above, the same as if fully rewritten herein.

69. Franklin County, acting under color of state law, deprived Mr. Wade of rights protected by the United States Constitution and/or federal law, causing harm to Mr. Wade.

70. The Franklin County Sheriff, acting under color of state law, deprived Mr. Wade of rights protected by the United States Constitution and/or federal law, causing harm to Mr. Wade.

71. Deputy Bates, acting under color of state law, deprive Mr. Wade of rights protected by the United States Constitution and/or federal law, causing harm to Mr. Wade.

72. Without limitation, Franklin County, Franklin County Sheriff, and Deputy Bates unlawfully deprived Mr. Wade of his right(s) to (a) procedural due process, (b) substantive due process, (c) equal protection, (d) protection against unreasonable searches and seizures under the Fourth Amendment to the United States Constitution, (e) confront and cross examine witnesses and counsel under the Sixth Amendment to the United States Constitution, and (f) protection against cruel and unusual punishment under the Eighth Amendment to the United States Constitution.

73. The actions and/or omissions of Defendants, Franklin County, Franklin County Sheriff, and Deputy Bates, as described above, are actionable under 42 U.S.C. § 1983.

74. Said actions and/or omissions caused Plaintiff to suffer harm.

75. The actions and/or omissions of Defendants Franklin County, Franklin County

Sheriff, and Deputy Bates, were made knowingly, intentionally, wantonly, and/or with reckless disregard for Plaintiff's safety and rights.

COUNT TWO: ASSAULT AND BATTERY

(Defendants Franklin County, Franklin County Sheriff, and Deputy Bates)

76. Plaintiff incorporates the statements above, the same as if fully rewritten herein.

77. Defendants, Franklin County, Franklin County Sheriff, and Deputy Bates, in their individual and official capacities, assaulted Plaintiff and committed battery when their actions resulted in Plaintiff being shocked for three, uninterrupted minutes.

78. Said Defendants intended to cause and did cause a harmful contact with Plaintiff's person.

79. Said Defendants intended to cause and did cause Plaintiff to suffer apprehension of an immediate harmful contact.

80. Plaintiff did not consent to said Defendants' conduct or acts.

81. As a direct and proximate result of the conduct of Franklin County, Franklin County Sheriff, and Deputy Bates, Plaintiff suffered physical injuries, extreme mental anguish, and pain.

82. As a direct and proximate result of the conduct of Franklin County, Franklin County Sheriff, and Deputy Bates, Plaintiff was required to obtain medical services and treatment and will, in the future, be compelled to incur additional obligations for medical treatment.

83. The acts and/or conduct of Franklin County, Franklin County Sheriff, and Deputy Bates, were done knowingly, willfully, and/or recklessly and wantonly, with malicious intent, and Plaintiff is entitled to punitive damages in an amount to be determined by proof at trial.

84. As a result of the aforementioned conduct of Franklin County, Franklin County Sheriff, and Deputy Bates, Plaintiff suffered harm in an amount to be determined by the Court

and proven at trial, in excess of \$25,000.00.

COUNT THREE: NEGLIGENCE
(Deputy Bates)

85. Plaintiff incorporates the statements above, the same as if fully rewritten herein.

86. Deputy Bates owed a duty to Mr. Wade to prevent physical injury and bodily harm.

87. Deputy Bates breached that duty as described above.

88. As a direct and proximate result of Deputy Bates's breach of the duty owed, Plaintiff sustained harm.

89. Plaintiff suffered harm in an amount to be determined by the Court and proven at trial, in excess of \$25,000.00.

COUNT FOUR: NEGLIGENT DESIGN AND MANUFACTURE
(Less Lethal and Nova)

90. Plaintiff incorporates the above statements as if fully rewritten herein.

91. Defendants, Less Lethal and Nova, designed, manufactured, and/or assembled the Stun Belt, which contained a defective condition.

92. This design, manufacture, and/or assembly defect made the Stun Belt unreasonably dangerous.

93. The Stun Belt remained unchanged and was in the same condition at the time of the Violation, resulting in personal injury sustained by Mr. Wade.

94. As a direct and proximate cause of the defectively designed, manufactured, and assembled Stun Belt, Plaintiff sustained permanent physical injury.

95. Plaintiff suffered harm in an amount to be determined by the Court and proven at trial, in excess of \$25,000.00.

COUNT FIVE: PERMANENT INJUNCTION
(Franklin County Sheriff, Less Lethal, Nova)

96. Plaintiff incorporates the above statements as if fully rewritten herein.

97. Because the Stun Belt is an inherently dangerous product, Plaintiff is entitled to a permanent injunction, pursuant to state and federal law, to prevent Franklin County Sheriff from using it and products like it.

98. Because the Stun Belt is an inherently dangerous product, Plaintiff is entitled to a permanent injunction, pursuant to state and federal law, to permanently enjoin Less Lethal and Nova from selling and/or distributing the Stun Belt and other products like it.

REQUEST FOR PUNITIVE DAMAGES
(As to All Defendants)

99. Plaintiff incorporates the above statements as if fully rewritten herein.

100. As described above, Defendants' engaged in willful, wanton, and reckless misconduct and malice, exhibiting a reckless disregard for the health and safety of patients.

101. The egregious and shocking conduct of Defendants, as described in this Complaint, could only result from widespread deficiencies and severely defective policies and practices, which Defendants failed to recognize, prevent, and/or remedy.

102. Defendants' conduct warrants the imposition of punitive damages.

PRAYER FOR RELIEF

WHEREFORE, having fully stated the claims against Defendants, Plaintiff respectfully demands judgment as follows:

A. Against Defendants, jointly and severally, in an amount to be determined by the Court, in excess of \$25,000.00, plus interest, punitive damages for the intentional, egregious, and reckless misconduct of Defendants;

- B. Granting injunctive relief necessary to prevent the Franklin County Sheriff from using the inherently dangerous Stun Belt and other products like it;
- C. Granting injunctive relief necessary to permanently enjoin Less Lethal and Nova from selling and/or distributing the Stun Belt and other products like it;
- D. Award Plaintiff the costs of this action, including reasonable attorneys' fees; and
- E. And grant any other relief this Court deems just and equitable.

Respectfully submitted,

/s/ Adam F. Florey
Adam F. Florey (0084826)

/s/ Adam R. Todd
Adam R. Todd (0077284)

FLOREY TODD, LTD.
5 E. Long Street, Suite 600
Columbus, OH 43215
Phone: 614.427.1556
Fax: 614.427.1856
aflorey@law-flc.com
atodd@law-flc.com
Attorneys for Plaintiff

JURY DEMAND

Plaintiff hereby respectfully demands a trial by jury on all issues so triable.

Respectfully submitted,

/s/ Adam F. Florey
Adam F. Florey (0084826)

/s/ Adam R. Todd
Adam R. Todd (0077284)

FRANKLIN COUNTY SHERIFF'S OFFICE
Routing Sheet for Correspondence

To: Sheriff Dallas Baldwin Report No: 19.462
 Subject: Response to AD 17
 Originator: Deputy Nick Bates #1199 Assignment: Common Pleas Date: 10/23/2019

Corporal/Sergeant: SEE ATTACHED REPORT. AD 17 ISSUED TO DEPUTY BATES
for CARE of office property, INATTENTION to duty. Inmate was evaluated
by medical & cleared to return to court. Sgt David Renee 535

No serious injuries to Prisoner - clearly non intentional - 405-7

Lieutenant: Inmate Wade was wearing a stun belt. Dep. Bates accidentally dropped the remote into
a toilet. He retrieved the remote. While drying the remote, the stun belt activated and did not
shut off as it normally would. Another deputy cut the stun belt so it could be taken off of
inmate Wade. Inmate Wade was checked by medical and red marks on his back were the only
noted injuries. Dep. Bates was issued an SHR-AD-17. #1199

Major: 10/24/19: Comments on SHR-AD-17. Due to Unintentional
Shocking and the destruction of the Stun Belt, I recommend
a WRITTEN REPRIMAND.

Chief Deputy:

10/25/19

MAJORS
TO I.A TO REVIEW ACCIDENTAL STUN
BELT ACTIVATION. WRITTEN REPRIMAND ISSUED
THIS DATE. POTENTIAL LITIGATION

Human Resources:


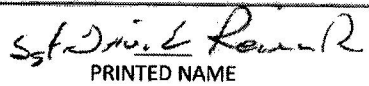

Finance:

Admin. Chief Deputy/Sheriff:

Follow Up Remarks:

10/31/19-File for information. - Lt Howard 437



Bureau #		Offense #		FRANKLIN COUNTY SHERIFF'S OFFICE				I.A.B. #		CAD#	
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Response to Aggression Report				Incident Report / Response to Aggression							
PROFILE INFORMATION											
Deputy - Last Name, First Name Bates, Nicholas				Badge 1199		Assignment CPC		Age 34	Sex M	Height 5'11"	Weight 205
Subject 1 - Last Name, First Name Wade, David				Social Security Number [REDACTED]		D.O.B. 10-22-79		Age 40	Sex M	Height 6'01"	Weight 180
Alias(s)			Slate # 0378605		Cell Assignment 3WL6			Facility FCC1			
Address (House number & Street Name) 2542 Hiawatha St						City Columbus		State OH	Zip Code 43211		Phone Number
Date 10/22/ 2019	Time 1301	Location 345 S High St. Cols. OH 43215 Courtroom 6F				Zone / District 4/41		<input type="checkbox"/> Dispatched Run <input type="checkbox"/> Self-Initiated <input type="checkbox"/> Jail Incident <input checked="" type="checkbox"/> Other courts		<input checked="" type="checkbox"/> Injury to Subject <input type="checkbox"/> Injury to Deputy <input type="checkbox"/> No Injury Reported <input type="checkbox"/> Injury to Other	
AGGRESSIVE / RESPONSE SUBJECT ACTIONS - CHECK ALL THAT APPLY											
<input type="checkbox"/> Verbal or Physical Danger Cues <input type="checkbox"/> Not Responding to Commands <input type="checkbox"/> Refusing to Move-Passive Resistive <input type="checkbox"/> Pulling Away From Deputy		<input type="checkbox"/> Running From Deputy <input type="checkbox"/> Pushing Deputy <input type="checkbox"/> Wrestling With Deputy <input type="checkbox"/> Striking or Kicking Deputy		<input type="checkbox"/> Assaulting Third Party <input type="checkbox"/> Life Threatening Weaponless Assault <input type="checkbox"/> Attempting to Disarm Deputy <input type="checkbox"/> Attempting to Escape				<input type="checkbox"/> Using Weapon Against Deputy <input type="checkbox"/> Weapon Type <input type="checkbox"/> Third Party Involvement <input type="checkbox"/> Other			
LEVEL OF CONTROL - CHECK ALL THAT APPLY (E = EFFECTIVE, I = INEFFECTIVE)											
<input checked="" type="checkbox"/> Force Not Used <input type="checkbox"/> Deputy Presence, verbal and non-verbal commands. <input type="checkbox"/> Handcuffs gapped and double locked. <input type="checkbox"/> Complaint of Injury from Handcuffing. <input type="checkbox"/> Taser Sparked for compliance.											
<input type="checkbox"/> Empty Hand Control (pressure point/joint manipulation / pain compliance) PPCT: Joint Manipulation Grounding Technique Physically Placed on Ground/Wall											
E I <input type="checkbox"/> <input type="checkbox"/>		E I <input type="checkbox"/> <input type="checkbox"/>		E I <input type="checkbox"/> <input type="checkbox"/>		E I <input type="checkbox"/> <input type="checkbox"/>		E I <input type="checkbox"/> <input type="checkbox"/>		E I <input type="checkbox"/> <input type="checkbox"/>	
Infra-Orbital Transport Wrist Lock Wrist Roll		Hypoglossal Jugular Notch Other		Explain:							
<input type="checkbox"/> Use of Immobilizing Restraint		E I <input type="checkbox"/> <input type="checkbox"/>		Explain:							
<input type="checkbox"/> Use of OC Spray		E I <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> Use of C.E.D.		E I <input type="checkbox"/> <input type="checkbox"/>					
<input type="checkbox"/> Hard Empty Hand Control (strike/kick/punch) Technique Used:		Common Peroneal Suprascapular Brachial Plexus Origin		E I <input type="checkbox"/> <input type="checkbox"/>		Femoral Radial Brachial Plexus Tie-in		E I <input type="checkbox"/> <input type="checkbox"/>		Tibial Median Other	
<input type="checkbox"/> Use of Impact Weapon Weapon Used:		Common Peroneal Radial		E I <input type="checkbox"/> <input type="checkbox"/>		Femoral Median		E I <input type="checkbox"/> <input type="checkbox"/>		Tibial Other	
<input type="checkbox"/> Police K-9 (Bite Only)		E I <input type="checkbox"/> <input type="checkbox"/>		Explain:							
<input type="checkbox"/> Less Lethal Control		40mm E I <input type="checkbox"/> <input type="checkbox"/>		Knee Knockers E I <input type="checkbox"/> <input type="checkbox"/>		Sting Bells Stinger Grenades E I <input type="checkbox"/> <input type="checkbox"/>		Other E I <input type="checkbox"/> <input type="checkbox"/>		Explain:	
<input type="checkbox"/> Deadly Force		Primary Firearm E I <input type="checkbox"/> <input type="checkbox"/>		Backup Firearm E I <input type="checkbox"/> <input type="checkbox"/>		Other E I <input type="checkbox"/> <input type="checkbox"/>					
DEPUTY-SUBJECT FACTORS/SPECIAL CIRCUMSTANCES - CHECK ALL THAT APPLY (ALL THAT APPLY MUST BE ARTICULATED WITHIN THE NARRATIVE)											
Deputy-Subject Factors:				Special Circumstances:							
<input type="checkbox"/> Age <input type="checkbox"/> Size <input type="checkbox"/> Sex		<input type="checkbox"/> Multiple Subjects <input type="checkbox"/> Multiple Deputies <input type="checkbox"/> Relative Strength		<input type="checkbox"/> Proximity of Weapons <input type="checkbox"/> Injury or Exhaustion		<input type="checkbox"/> Taken to Ground <input type="checkbox"/> Proximity of Subject		<input type="checkbox"/> Knowledge of Subject (Charges, Prior Complaints, etc.) <input type="checkbox"/> Location of Incident (Environmental factors) <input type="checkbox"/> Subject Handcuffed <input type="checkbox"/> Other			
REPORTED MEDICAL TREATMENT											
Deputy's Injuries (described):											
1. none											
2.											
Treated By Medical/ EMS / Hospital <input type="checkbox"/> for what: By whom:											
Subject's Injuries (described):											
1. red marks on lower back											
2.											
Treated By Medical/ EMS / Hospital <input checked="" type="checkbox"/> for what: red marks By whom: CC1 LPN Tasha Smith											
<input type="checkbox"/> Injuries Prior Contact (Explain):											

Bureau #	FRANKLIN COUNTY SHERIFF'S OFFICE	I.A.B #
SUPPORTING DETAILS		
Deputy Narrative – (Sign/Date last page) <input type="checkbox"/> U-10-100 (SHR-AD-27) Attached IF narrative continues onto additional pages, ✓ here <input type="checkbox"/> .		
<p>Begin narrative here >> On 10/22/19 I was assigned to Courtroom 6F for the trial of Wade, David 19CR1984. I observed my partner for the day, Deputy Kevin Bennett #962, bringing Mr. Wade to Court at approximately 0900. It was at this point we headed up to our courtroom with Mr. Wade. Deputy Bennett gave me the remote for the RACC (Remote Activated Custody Control system) stun belt that Mr. Wade was wearing. Inmate Wade was unable to wear leg irons/shackles due to the fact that he was pro se and would need to move about the courtroom in front of the jury, without letting himself appear to be in custody. This was a court order.</p> <p>During the lunch hour I went to use the rest room. It was at this point the remote fell off of my duty belt into the toilet water. I quickly returned to the courtroom to check on the welfare of Mr. Wade and to get another Deputy. After observing that Mr. Wade was unharmed Deputy Natalie Randall came back to assist me in removing the remote. I put on gloves and retrieved the remote. While I was gently drying it off I heard screaming from the courtroom. Fearing that the remote had shorted, I immediately ran to the courtroom. I could hear the belt cycling repeatedly shocking Mr. Wade. Deputy Teresa Hatzler #846 was with the inmate. I pulled the belt away from his body, but the device continued to malfunction and shock Mr. Wade. I then put my hand between the device and Mr. Wade's body to prevent further shocks from occurring. I instructed Deputy Todd Dennis #1151 to use a knife to cut the belt. Once removed, Deputy Dennis escorted Mr. Wade to the holding area in handcuffs while I advised both Sergeants Davis and Reiner what had taken place.</p> <p>Then Deputy Bennett and I took Mr. Wade to medical. While there being evaluated I took pictures of Mr. Wade and his lower back. After cleared by medical Mr. Wade said he wanted to return to continue his trial. I then gave Mr. Wade a witness statement. << End of narrative.</p>		
COMPLETING DEPUTY SECTION		
<u>Nicholas Bates</u> PRINTED NAME	 SIGNATURE	<u>1199</u> BADGE
<u>10/22/2019</u> DATE		
REVIEWING SUPERVISOR SECTION		
 PRINTED NAME	 SIGNATURE	<u>SSS</u> BADGE
<u>10/22/19</u> DATE		

U-10.128A (5/2012)

Bureau #		FRANKLIN COUNTY SHERIFF'S OFFICE				I.A.B #	
WITNESSES							
Deputy / Witness - Last Name, First Name Hatzter, Teresa		Facility CPC	Job / Cell Assignment Deputy			Badge / Slate # 846	
Address (House number & Street Name) 345 S High St		City Columbus		State OH	Zip Code 43215	Phone Number 525-8915	
Deputy / Witness - Last Name, First Name Dennis, Todd		Facility CPC	Job / Cell Assignment Deputy			Badge / Slate # 1151	
Address (House number & Street Name) 345 S High St		City Columbus		State OH	Zip Code 43215	Phone Number 525-8915	
Deputy / Witness - Last Name, First Name Randall, Natalie		Facility CPC	Job / Cell Assignment Deputy			Badge / Slate # 1170	
Address (House number & Street Name) 345 S High St		City Columbus		State OH	Zip Code 43215	Phone Number 525-8915	
Deputy / Witness - Last Name, First Name Bennett, Kevin		Facility CPC	Job / Cell Assignment Deputy			Badge / Slate # 962	
Address (House number & Street Name) 345 S High St		City Columbus		State OH	Zip Code 43215	Phone Number 525-8915	
Deputy / Witness - Last Name, First Name		Facility	Job / Cell Assignment			Badge / Slate #	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Deputy / Witness - Last Name, First Name		Facility	Job / Cell Assignment			Badge / Slate #	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Deputy / Witness - Last Name, First Name		Facility	Job / Cell Assignment			Badge / Slate #	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Deputy / Witness - Last Name, First Name		Facility	Job / Cell Assignment			Badge / Slate #	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
ADDITIONAL SUBJECTS							
Subject - Last Name, First Name		Social Security Number	D.O.B.	Age	Sex	Height	Weight
Alias(s)		Slate #		Cell Assignment		Facility	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Subject - Last Name, First Name		Social Security Number	D.O.B.	Age	Sex	Height	Weight
Alias(s)		Slate #		Cell Assignment		Facility	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Subject - Last Name, First Name		Social Security Number	D.O.B.	Age	Sex	Height	Weight
Alias(s)		Slate #		Cell Assignment		Facility	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	
Subject - Last Name, First Name		Social Security Number	D.O.B.	Age	Sex	Height	Weight
Alias(s)		Slate #		Cell Assignment		Facility	
Address (House number & Street Name)		City		State	Zip Code	Phone Number	

Bureau #		Offense #		FRANKLIN COUNTY SHERIFF'S OFFICE				I.A.B. #		CAD#	
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Response to Aggression Report				Incident Report / Response to Aggression							
PROFILE INFORMATION											
Deputy - Last Name, First Name Hatzer, Teresa				Badge 846		Assignment Common Pleas Court		Age 57	Sex f	Height 5'4"	Weight 170
Subject 1 - Last Name, First Name Wade, David				Social Security Number [REDACTED]		D.O.B. 10221979		Age 40	Sex m	Height 6'1"	Weight 180
Alias(s)			Slate # 0378605		Cell Assignment 3w/6			Facility fccc 1			
Address (House number & Street Name) 2542 Hlawatha st.					City Columbus		State oh	Zip Code 43211		Phone Number	
Date 10222019	Time 1301	Location 345 S. High St. columbus, Ohio 43215 Courtroom 6F			Zone / District 4/41			<input type="checkbox"/> Dispatched Run <input type="checkbox"/> Self-Initiated <input type="checkbox"/> Jail Incident <input checked="" type="checkbox"/> Other Courts		<input checked="" type="checkbox"/> Injury to Subject <input type="checkbox"/> Injury to Deputy <input type="checkbox"/> No Injury Reported <input type="checkbox"/> Injury to Other	
AGGRESSIVE / RESPONSE SUBJECT ACTIONS - CHECK ALL THAT APPLY											
<input type="checkbox"/> Verbal or Physical Danger Cues <input type="checkbox"/> Not Responding to Commands <input type="checkbox"/> Refusing to Move-Passive Resistive <input type="checkbox"/> Pulling Away From Deputy											
<input type="checkbox"/> Running From Deputy <input type="checkbox"/> Pushing Deputy <input type="checkbox"/> Wrestling With Deputy <input type="checkbox"/> Striking or Kicking Deputy											
<input type="checkbox"/> Assaulting Third Party <input type="checkbox"/> Life Threatening Weaponless Assault <input type="checkbox"/> Attempting to Disarm Deputy <input type="checkbox"/> Attempting to Escape											
<input type="checkbox"/> Using Weapon Against Deputy Weapon Type <input type="checkbox"/> Third Party Involvement <input type="checkbox"/> Other											
LEVEL OF CONTROL - CHECK ALL THAT APPLY (E = EFFECTIVE, I = INEFFECTIVE)											
<input checked="" type="checkbox"/> Force Not Used <input type="checkbox"/> Deputy Presence, verbal and non-verbal commands. <input type="checkbox"/> Handcuffs gapped and double locked. <input type="checkbox"/> Complaint of Injury from Handcuffing. <input type="checkbox"/> Taser Sparked for compliance.											
<input type="checkbox"/> Empty Hand Control (pressure point/joint manipulation / pain compliance) PPCT: Joint Manipulation Grounding Technique Physically Placed on Ground/Wall											
E I [] [] [] [] [] []											
Infra-Orbital Transport Wrist Lock Wrist Roll											
E I [] [] [] [] [] []											
Hypoglossal Jugular Notch Other											
E I [] [] [] [] [] [] Explain:											
<input type="checkbox"/> Use of Immobilizing Restraint E I [] [] Explain:											
<input type="checkbox"/> Use of OC Spray E I [] [] <input type="checkbox"/> Use of C.E.D. E I [] []											
<input type="checkbox"/> Hard Empty Hand Control (strike/kick/punch) Technique Used: Common Peroneal Suprascapular Brachial Plexus Origin											
E I [] [] [] [] [] []											
Femoral Radial Brachial Plexus Tie-in											
E I [] [] [] [] [] []											
Tibial Median Other											
E I [] [] [] [] [] [] Explain:											
<input type="checkbox"/> Use of Impact Weapon Weapon Used: Common Peroneal Radial											
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Femoral Median											
E I [] [] [] []											
Tibial Other											
E I [] [] [] [] Explain:											
<input type="checkbox"/> Police K-9 (Bite Only) E I [] []											
<input type="checkbox"/> Less Lethal Control 40mm E I [] [] Knee Knockers E I [] [] Sting Balls Stinger Grenades E I [] [] Other E I [] [] Explain:											
<input type="checkbox"/> Deadly Force Primary Firearm E I [] [] Backup Firearm E I [] [] Other E I [] []											
DEPUTY-SUBJECT FACTORS/SPECIAL CIRCUMSTANCES - CHECK ALL THAT APPLY (ALL THAT APPLY MUST BE ARTICULATED WITHIN THE NARRATIVE)											
Deputy-Subject Factors: <input type="checkbox"/> Age <input type="checkbox"/> Size <input type="checkbox"/> Sex											
Special Circumstances: <input type="checkbox"/> Proximity of Weapons <input type="checkbox"/> Injury or Exhaustion <input type="checkbox"/> Multiple Subjects <input type="checkbox"/> Multiple Deputies <input type="checkbox"/> Relative Strength <input type="checkbox"/> Taken to Ground <input type="checkbox"/> Proximity of Subject <input type="checkbox"/> Knowledge of Subject (Charges, Prior Complaints, etc.) <input type="checkbox"/> Location of Incident (Environmental factors) <input type="checkbox"/> Subject Handcuffed <input type="checkbox"/> Other											
REPORTED MEDICAL TREATMENT											
Deputy's Injuries (described): 1. None 2.											
Treated By Medical/ EMS / Hospital <input type="checkbox"/> for what: By whom:											
Subject's Injuries (described): 1. red marks on lower back 2.											
Treated By Medical/ EMS / Hospital <input checked="" type="checkbox"/> for what: red marks By whom: Tasha Smith LPN											
<input type="checkbox"/> Injuries Prior Contact (Explain):											


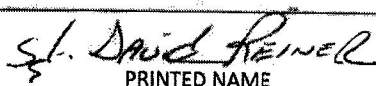

Bureau #	FRANKLIN COUNTY SHERIFF'S OFFICE	I.A.B #
SUPPORTING DETAILS		
Deputy Narrative – (Sign/Date last page) <input type="checkbox"/> U-10-100 (SHR-AD-27) Attached IF narrative continues onto additional pages, ✓ here <input type="checkbox"/> .		
Begin narrative here >> On Tuesday, 10/22/2019 at 1301 hours, I was sitting in courtroom 6F with Deputy Natalie Randall #1070, providing security for Inmate David Wade 0378605. Dep. Nicholas Bates #1199 opened the door from the breezeway to the courtroom and asked for one of us to come out with him. Dep. N. Randall #1070 said she would go with Dep. Bates #1199 while I stayed in the courtroom with inmate David Wade. After about a minute or so Inmate David Wade started screaming, got down on his knees and said I didn't do anything wrong. I then realized I could hear the stun belt going off at very short intervals. I ran over to the door, opened it and yelled "Hey" as Dep. Todd Dennis #1151 and Dep. N. Bates #1199 were running toward me. When Dep. Bates ran into the courtroom he said the remote for the stun belt was shorting out. I ran into the holding cell area and took the remote from Dep. N. Randall, marked for Sgt. David Reiner CS1 and Sgt. Tom Davis CS4 to come to the holding cell for 6 E/F courtrooms. I removed the back off of the remote and attempted to remove the battery but was unable to get the battery out. Dep. Bates then came into the holding area holding the stun belt and Dep. Dennis was escorting inmate David Wade into the first holding cell. Sgt. Reiner and Sgt Davis arrived shortly after inmate David Wade was placed in the holding cell. << End of narrative.		
COMPLETING DEPUTY SECTION		
<u>Teresa L. Hatzel</u> PRINTED NAME	 SIGNATURE	846 BADGE
		10/23/19 DATE
REVIEWING SUPERVISOR SECTION		
<u>Sgt. David Reiner</u> PRINTED NAME	 SIGNATURE	535 BADGE
		10/23/19 DATE

U-10.128A (5/2012)

Bureau #		Offense #		FRANKLIN COUNTY SHERIFF'S OFFICE Incident Report / Response to Aggression		I.A.B. #		CAD#																																																			
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Response to Aggression Report																																																											
PROFILE INFORMATION																																																											
Deputy - Last Name, First Name Dennis, Todd				Badge 1151		Assignment CP		Age 46	Sex M	Height 6'1"	Weight 243																																																
Subject 1 - Last Name, First Name WADE, DAVID				Social Security Number [REDACTED]		D.O.B. 10/22/79		Age 40	Sex M	Height 6'1"	Weight 180																																																
Alias(s)				Slate # 0378605		Cell Assignment 3WL6		Facility FCCC1																																																			
Address (House number & Street Name) 2542 HIAWATHA ST.				City COLUMBUS		State OH		Zip Code 43211		Phone Number																																																	
Date 10/22/19	Time 1301	Location 345 S HIGH ST		Zone / District 4/41		<input type="checkbox"/> Dispatched Run <input type="checkbox"/> Self-Initiated <input type="checkbox"/> Jail Incident <input checked="" type="checkbox"/> Other courts		<input checked="" type="checkbox"/> Injury to Subject <input type="checkbox"/> Injury to Deputy <input type="checkbox"/> No Injury Reported <input type="checkbox"/> Injury to Other																																																			
AGGRESSIVE / RESPONSE SUBJECT ACTIONS – CHECK ALL THAT APPLY																																																											
<input type="checkbox"/> Verbal or Physical Danger Cues <input type="checkbox"/> Not Responding to Commands <input type="checkbox"/> Refusing to Move—Passive Resistive <input type="checkbox"/> Pulling Away From Deputy												<input type="checkbox"/> Running From Deputy <input type="checkbox"/> Pushing Deputy <input type="checkbox"/> Wrestling With Deputy <input type="checkbox"/> Striking or Kicking Deputy												<input type="checkbox"/> Assaulting Third Party <input type="checkbox"/> Life Threatening Weaponless Assault <input type="checkbox"/> Attempting to Disarm Deputy <input type="checkbox"/> Attempting to Escape												<input type="checkbox"/> Using Weapon Against Deputy <input type="checkbox"/> Weapon Type <input type="checkbox"/> Third Party Involvement <input type="checkbox"/> Other																							
LEVEL OF CONTROL – CHECK ALL THAT APPLY (E = EFFECTIVE, I = INEFFECTIVE)																																																											
<input checked="" type="checkbox"/> Force Not Used <input type="checkbox"/> Deputy Presence, verbal and non-verbal commands. <input checked="" type="checkbox"/> Handcuffs gapped and double locked. <input type="checkbox"/> Complaint of Injury from Handcuffing. <input type="checkbox"/> Taser Sparked for compliance.																																																											
<input type="checkbox"/> Empty Hand Control (pressure point/joint manipulation / pain compliance)																																																											
PPCT: Joint Manipulation <input type="checkbox"/> E <input type="checkbox"/> I Grounding Technique <input type="checkbox"/> E <input type="checkbox"/> I Physically Placed on Ground/Wall <input type="checkbox"/> E <input type="checkbox"/> I												Infra-Orbital <input type="checkbox"/> E <input type="checkbox"/> I Transport Wrist Lock <input type="checkbox"/> E <input type="checkbox"/> I Wrist Roll <input type="checkbox"/> E <input type="checkbox"/> I												Hypoglossal <input type="checkbox"/> E <input type="checkbox"/> I Jugular Notch <input type="checkbox"/> E <input type="checkbox"/> I Other <input type="checkbox"/> E <input type="checkbox"/> I Explain:																																			
<input type="checkbox"/> Use of Immobilizing Restraint <input type="checkbox"/> E <input type="checkbox"/> I Explain:																																																											
<input type="checkbox"/> Use of OC Spray <input type="checkbox"/> E <input type="checkbox"/> I												<input type="checkbox"/> Use of C.E.D. <input type="checkbox"/> E <input type="checkbox"/> I																																															
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<input type="checkbox"/> Use of Impact Weapon												Weapon Used: Common Peroneal <input type="checkbox"/> E <input type="checkbox"/> I Radial <input type="checkbox"/> E <input type="checkbox"/> I												Femoral <input type="checkbox"/> E <input type="checkbox"/> I Median <input type="checkbox"/> E <input type="checkbox"/> I												Tibial <input type="checkbox"/> E <input type="checkbox"/> I Other <input type="checkbox"/> E <input type="checkbox"/> I Explain:																							
<input type="checkbox"/> Police K-9 (Bite Only) <input type="checkbox"/> E <input type="checkbox"/> I																																																											
<input type="checkbox"/> Less Lethal Control												40mm <input type="checkbox"/> E <input type="checkbox"/> I Knee Knockers <input type="checkbox"/> E <input type="checkbox"/> I Sting Balls <input type="checkbox"/> E <input type="checkbox"/> I Stinger Grenades <input type="checkbox"/> E <input type="checkbox"/> I Other <input type="checkbox"/> E <input type="checkbox"/> I Explain:																																															
<input type="checkbox"/> Deadly Force												Primary Firearm <input type="checkbox"/> E <input type="checkbox"/> I Backup Firearm <input type="checkbox"/> E <input type="checkbox"/> I Other <input type="checkbox"/> E <input type="checkbox"/> I																																															
DEPUTY-SUBJECT FACTORS/SPECIAL CIRCUMSTANCES – CHECK ALL THAT APPLY (ALL THAT APPLY MUST BE ARTICULATED WITHIN THE NARRATIVE)																																																											
Deputy-Subject Factors: <input type="checkbox"/> Age <input type="checkbox"/> Size <input type="checkbox"/> Sex												<input type="checkbox"/> Multiple Subjects <input type="checkbox"/> Multiple Deputies <input type="checkbox"/> Relative Strength												Special Circumstances: <input type="checkbox"/> Proximity of Weapons <input type="checkbox"/> Injury or Exhaustion												<input type="checkbox"/> Taken to Ground <input type="checkbox"/> Proximity of Subject												<input type="checkbox"/> Knowledge of Subject (Charges, Prior Complaints, etc.) <input type="checkbox"/> Location of Incident (Environmental factors) <input type="checkbox"/> Subject Handcuffed <input type="checkbox"/> Other											
REPORTED MEDICAL TREATMENT																																																											
Deputy's Injuries (described): 1. NONE 2.																																																											
Treated By Medical/ EMS / Hospital <input type="checkbox"/> for what: By whom:																																																											
Subject's Injuries (described): 1. red marks on lower back 2.																																																											
Treated By Medical/ EMS / Hospital <input checked="" type="checkbox"/> for what: red marks By whom: CC1 LPN Tasha Smith																																																											
<input type="checkbox"/> Injuries Prior Contact (Explain):																																																											




U-10.128A (5/2012)

Exhibit A

Bureau #	FRANKLIN COUNTY SHERIFF'S OFFICE	I.A.B #
SUPPORTING DETAILS		
Deputy Narrative – (Sign/Date last page) <input type="checkbox"/> U-10-100 (SHR-AD-27) Attached IF narrative continues onto additional pages, ✓ here <input type="checkbox"/> .		
Begin narrative here >> On 10/22/19 at approx. 1304 hrs. I (Deputy T. Dennis #1151) was in Common Pleas Court room 6E when I heard yelling that appeared to be coming from court room 6F. I immediately ran through the breezeway and into court room 6F. Upon entering I saw Inmate Wade, David 0378605 yelling and screaming with his knees on the floor and his hands on the top of the table. At that time I could hear that the stun belt was activated at about 2 to 3 second intervals and continued this action for approx. 7 seconds before Deputy Bates, Nick #1199 pulled the back of the belt away from Inmate Wade's skin. The key for the belt could not be located at that moment so I used my knife to cut the belt off of Inmate Wade. (the belt continued to go off for several minutes after it was removed from his body.) I then placed handcuffs on Inmate Wade and escorted him to the holding cell area in the breezeway. I uncuffed Inmate Wade and secured the door without further incident. << End of narrative.		
COMPLETING DEPUTY SECTION		
<u>TODD DENNIS</u> PRINTED NAME	 SIGNATURE	<u>1151</u> BADGE
		<u>10-22-19</u> DATE
REVIEWING SUPERVISOR SECTION		
 PRINTED NAME	 SIGNATURE	<u>S35</u> BADGE
		<u>10-22-19</u> DATE


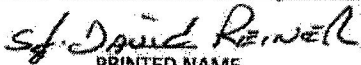

U-10.128A (5/2012)

Bureau #		Offense #		FRANKLIN COUNTY SHERIFF'S OFFICE			I.A.B. #		CAD#																												
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Response to Aggression Report				Incident Report / Response to Aggression																																	
PROFILE INFORMATION																																					
Deputy - Last Name, First Name RANDALL, NATALIE				Badge 1070		Assignment CP		Age 37	Sex F	Height 5'3"	Weight 125																										
Subject 1 - Last Name, First Name WADE, DAVID				Social Security Number [REDACTED]		D.O.B. 10-22-1979		Age 40	Sex M	Height 6'1"	Weight 180																										
Alias(s)			Slate # 0378605		Cell Assignment 3WL6			Facility MJ																													
Address (House number & Street Name) 2542 HIAWATHA ST					City COLUMBUS		State OH	Zip Code 43211		Phone Number NA																											
Date 10-22-2019	Time 1:01 PM	Location 345 SOUTH HIGH ST COLUMBUS OH 43215 COURTROOM 6F			Zone / District 4/41			<input type="checkbox"/> Dispatched Run <input type="checkbox"/> Self-Initiated <input type="checkbox"/> Jail Incident <input checked="" type="checkbox"/> Other courts		<input checked="" type="checkbox"/> Injury to Subject <input type="checkbox"/> Injury to Deputy <input type="checkbox"/> No Injury Reported <input type="checkbox"/> Injury to Other																											
AGGRESSIVE / RESPONSE SUBJECT ACTIONS – CHECK ALL THAT APPLY																																					
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> Verbal or Physical Danger Cues <input type="checkbox"/> Not Responding to Commands <input type="checkbox"/> Refusing to Move—Passive Resistive <input type="checkbox"/> Pulling Away From Deputy </div> <div style="width: 33%;"> <input type="checkbox"/> Running From Deputy <input type="checkbox"/> Pushing Deputy <input type="checkbox"/> Wrestling With Deputy <input type="checkbox"/> Striking or Kicking Deputy </div> <div style="width: 33%;"> <input type="checkbox"/> Assaulting Third Party <input type="checkbox"/> Life Threatening Weaponless Assault <input type="checkbox"/> Attempting to Disarm Deputy <input type="checkbox"/> Attempting to Escape </div> <div style="width: 33%;"> <input type="checkbox"/> Using Weapon Against Deputy <input type="checkbox"/> Weapon Type <input type="checkbox"/> Third Party Involvement <input type="checkbox"/> Other </div> </div>																																					
LEVEL OF CONTROL – CHECK ALL THAT APPLY (E = EFFECTIVE, I = INEFFECTIVE)																																					
<input checked="" type="checkbox"/> Force Not Used <input type="checkbox"/> Deputy Presence, verbal and non-verbal commands. <input type="checkbox"/> Handcuffs gapped and double locked. <input type="checkbox"/> Complaint of Injury from Handcuffing. <input type="checkbox"/> Taser Sparked for compliance.																																					
<input type="checkbox"/> Empty Hand Control (pressure point/joint manipulation / pain compliance) PPCT: <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Joint Manipulation</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Infra-Orbital</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Hypoglossal</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> </tr> <tr> <td>Grounding Technique</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Transport Wrist Lock</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Jugular Notch</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Physically Placed on Ground/Wall</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Wrist Roll</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Explain:</td> </tr> </table>											Joint Manipulation	E	I	Infra-Orbital	E	I	Hypoglossal	E	I	Grounding Technique	<input type="checkbox"/>	<input type="checkbox"/>	Transport Wrist Lock	<input type="checkbox"/>	<input type="checkbox"/>	Jugular Notch	<input type="checkbox"/>	<input type="checkbox"/>	Physically Placed on Ground/Wall	<input type="checkbox"/>	<input type="checkbox"/>	Wrist Roll	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/> Explain:
Joint Manipulation	E	I	Infra-Orbital	E	I	Hypoglossal	E	I																													
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<input type="checkbox"/> Use of Immobilizing Restraint <table style="width: 100px; border: none;"> <tr><td>E</td><td>I</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table> Explain:											E	I	<input type="checkbox"/>	<input type="checkbox"/>																							
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<input type="checkbox"/> Use of OC Spray <table style="width: 100px; border: none;"> <tr><td>E</td><td>I</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table> <input type="checkbox"/> Use of C.E.D. <table style="width: 100px; border: none;"> <tr><td>E</td><td>I</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>											E	I	<input type="checkbox"/>	<input type="checkbox"/>	E	I	<input type="checkbox"/>	<input type="checkbox"/>																			
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<input type="checkbox"/> Hard Empty Hand Control (strike/kick/punch) Technique Used: <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Common Peroneal</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Femoral</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Tibial</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> </tr> <tr> <td>Suprascapular</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Radial</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Median</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Brachial Plexus Origin</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Brachial Plexus Tie-in</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Explain:</td> </tr> </table>											Common Peroneal	E	I	Femoral	E	I	Tibial	E	I	Suprascapular	<input type="checkbox"/>	<input type="checkbox"/>	Radial	<input type="checkbox"/>	<input type="checkbox"/>	Median	<input type="checkbox"/>	<input type="checkbox"/>	Brachial Plexus Origin	<input type="checkbox"/>	<input type="checkbox"/>	Brachial Plexus Tie-in	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/> Explain:
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<input type="checkbox"/> Use of Impact Weapon Weapon Used: <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Common Peroneal</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Femoral</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> <td style="width: 25%;">Tibial</td> <td style="width: 5%;">E</td> <td style="width: 5%;">I</td> </tr> <tr> <td>Radial</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Median</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> Explain:</td> </tr> </table>											Common Peroneal	E	I	Femoral	E	I	Tibial	E	I	Radial	<input type="checkbox"/>	<input type="checkbox"/>	Median	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/> Explain:									
Common Peroneal	E	I	Femoral	E	I	Tibial	E	I																													
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Deputy's Injuries (described): 1. NONE 2.																																					
Treated By Medical/ EMS / Hospital <input type="checkbox"/> for what: By whom:																																					
Subject's Injuries (described): 1. red marks lower back 2.																																					
Treated By Medical/ EMS / Hospital <input checked="" type="checkbox"/> for what: By whom: NURSE TASHA SMITH LPN																																					
<input type="checkbox"/> Injuries Prior Contact (Explain):																																					

Bureau #	FRANKLIN COUNTY SHERIFF'S OFFICE	I.A.B #
SUPPORTING DETAILS		
Deputy Narrative – (Sign/Date last page) <input type="checkbox"/> U-10-100 (SHR-AD-27) Attached IF narrative continues onto additional pages, ✓ here <input type="checkbox"/> .		
Begin narrative here >> On Tuesday October 22, 2019, at approximately 1:01pm, I was sitting in courtroom 6F with Deputy Teresa Hatzler #846 providing security for inmate David Wade 0378605. Inmate Wade was listening to audio recordings in regards to his trial. Deputy Nick Bates #1199 enters the courtroom and asks if one of us could come to the back where the inmates are secured. I volunteered to go to see what Dep Bates needed. When we got into the holding area, Deputy Bates showed me that he had dropped the stun belt remote into the toilet. Dep Bates put on gloves and retrieved the remote from the toilet. The remote was dripping with toilet water. Dep Bates grabbed paper towels and began to dry the remote. Just about that time I heard inmate Wade screaming. I looked at Dep Bates and said I think the belt is stunning him. I could hear the stun belt had activated. I tried to take the back off the remote to remove the battery. Deputy Hatzler then entered the holding area and took the remote. She was able to get the back off but the battery was still stuck inside. Dep Bates then entered the holding area with the stun belt that was still activated. Inmate Wade was escorted into the holding cell by Deputy Todd Dennis #1151. << End of narrative.		
COMPLETING DEPUTY SECTION		
<u>DEPUTY NATALIE RANDALL</u> PRINTED NAME	 SIGNATURE	<u>1070</u> BADGE
		<u>10/22/2019</u> DATE
REVIEWING SUPERVISOR SECTION		
 PRINTED NAME	 SIGNATURE	<u>S35</u> BADGE
		<u>10/23/19</u> DATE

U-10.128A (5/2012)

Bureau #	Offense #	FRANKLIN COUNTY SHERIFF'S OFFICE Incident Report / Response to Aggression		I.A.B. #	CAD#		
<input checked="" type="checkbox"/> Incident Report <input type="checkbox"/> Response to Aggression Report							
PROFILE INFORMATION							
Deputy - Last Name, First Name Bennett, Kevin		Badge 962	Assignment CP	Age 54	Sex m	Height 6'0	Weight 205
Subject 1 - Last Name, First Name WADE, DAVID		Social Security Number [REDACTED]	D.O.B. 10-22-1979	Age 40	Sex M	Height 6'1	Weight 180
Alias(s)		Slate # 0378605	Cell Assignment 3WL6	Facility MJ			
Address (House number & Street Name) 2542 HIAWATHA ST			City COLUMBUS	State OH	Zip Code 43211	Phone Number NA	
Date 10-22-2019	Time 1:01 PM	Location 345 SOUTH HIGH ST COLUMBUS OH 43215 COURTROOM 6F		Zone / District 4/41		<input type="checkbox"/> Dispatched Run <input type="checkbox"/> Self-Initiated <input type="checkbox"/> Jail Incident <input checked="" type="checkbox"/> Other courts	
				<input checked="" type="checkbox"/> Injury to Subject <input type="checkbox"/> Injury to Deputy <input type="checkbox"/> No Injury Reported <input type="checkbox"/> Injury to Other			
AGGRESSIVE / RESPONSE SUBJECT ACTIONS - CHECK ALL THAT APPLY							
<input type="checkbox"/> Verbal or Physical Danger Cues <input type="checkbox"/> Not Responding to Commands <input type="checkbox"/> Refusing to Move-Passive Resistive <input type="checkbox"/> Pulling Away From Deputy		<input type="checkbox"/> Running From Deputy <input type="checkbox"/> Pushing Deputy <input type="checkbox"/> Wrestling With Deputy <input type="checkbox"/> Striking or Kicking Deputy		<input type="checkbox"/> Assaulting Third Party <input type="checkbox"/> Life Threatening Weaponless Assault <input type="checkbox"/> Attempting to Disarm Deputy <input type="checkbox"/> Attempting to Escape		<input type="checkbox"/> Using Weapon Against Deputy Weapon Type _____ <input type="checkbox"/> Third Party Involvement <input type="checkbox"/> Other	
LEVEL OF CONTROL - CHECK ALL THAT APPLY (E = EFFECTIVE, I = INEFFECTIVE)							
<input checked="" type="checkbox"/> Force Not Used <input type="checkbox"/> Deputy Presence, verbal and non-verbal commands, <input type="checkbox"/> Handcuffs gapped and double locked, <input type="checkbox"/> Complaint of injury from Handcuffing, <input type="checkbox"/> Taser Sparked for compliance.							
<input type="checkbox"/> Empty Hand Control (pressure point/joint manipulation / pain compliance) PPCT: Joint Manipulation E I Infra-Orbital E I Hypoglossal E I Grounding Technique □ □ Transport Wrist Lock □ □ Jugular Notch □ □ Physically Placed on Ground/Wall □ □ Wrist Roll □ □ Other □ □ Explain:							
<input type="checkbox"/> Use of Immobilizing Restraint E I Explain:							
<input type="checkbox"/> Use of OC Spray E I <input type="checkbox"/> Use of C.E.D. E I							
<input type="checkbox"/> Hard Empty Hand Control (strike/kick/punch) Technique Used:		Common Peroneal E I Suprascapular □ □ Brachial Plexus Origin □ □		Femoral E I Radial □ □ Brachial Plexus Tie-In □ □		Tibial E I Median □ □ Other □ □ Explain:	
<input type="checkbox"/> Use of Impact Weapon Weapon Used:		Common Peroneal E I Radial □ □		Femoral E I Median □ □		Tibial E I Other □ □ Explain:	
<input type="checkbox"/> Police K-9 (Bite Only) E I							
<input type="checkbox"/> Less Lethal Control 40mm E I Knee Knockers E I Sting Balls E I Slinger Grenades □ □ Other E I Explain:							
<input type="checkbox"/> Deadly Force Primary Firearm E I Backup Firearm E I Other E I							
DEPUTY-SUBJECT FACTORS/SPECIAL CIRCUMSTANCES - CHECK ALL THAT APPLY (ALL THAT APPLY MUST BE ARTICULATED WITHIN THE NARRATIVE)							
Deputy-Subject Factors: <input type="checkbox"/> Age <input type="checkbox"/> Multiple Subjects <input type="checkbox"/> Size <input type="checkbox"/> Multiple Deputies <input type="checkbox"/> Sex <input type="checkbox"/> Relative Strength		Special Circumstances: <input type="checkbox"/> Proximity of Weapons <input type="checkbox"/> Injury or Exhaustion <input type="checkbox"/> Taken to Ground <input type="checkbox"/> Proximity of Subject <input type="checkbox"/> Knowledge of Subject (Charges, Prior Complaints, etc.) <input type="checkbox"/> Location of Incident (Environmental factors) <input type="checkbox"/> Subject Handcuffed <input type="checkbox"/> Other _____					
REPORTED MEDICAL TREATMENT							
Deputy's Injuries (described):		1. NONE					
		2. _____					
Treated By Medical/ EMS / Hospital <input type="checkbox"/> , for what:		By whom:					
Subject's Injuries (described):		1. red marks lower back					
		2. _____					
Treated By Medical/ EMS / Hospital <input checked="" type="checkbox"/> , for what:		By whom: NURSE TASHA SMITH LPN					
<input type="checkbox"/> Injuries Prior Contact (Explain):							

Bureau #	FRANKLIN COUNTY SHERIFF'S OFFICE	I.A.B #
SUPPORTING DETAILS		
Deputy Narrative – (Sign/Date last page) <input type="checkbox"/> U-10-100 (SHR-AD-27) Attached IF narrative continues onto additional pages, ✓ here <input type="checkbox"/> .		
Begin narrative here >> Tuesday October 22, 2019 I was working Courtroom 6F, while on lunch break around 1:00pm, I went to the Sgts office on the third floor Commom Pleas Courthouse to pick up a piece of paper. When I returned to Courtroom 6F holding cell area, I saw Deputy Teresa Hatzer #856 trying to get the battery out of a stun belt controller. She told me Inmate David Wade 0378605 was being shocked by the stun belt he was wearing. She told me the controller had fallen off Deputy Nicholas Bates gun belt while he was using the restroom, into the toilet, Inmate Wade was then coming through the holding cell door, the stun belt had been cut off of him, he was placed in the holding cell. Deputy Bates and I then took Inmate Wade to Medical at Fccc1, he was treated and cleared by nurse Tasha Smith Lpn. << End of narrative.		
COMPLETING DEPUTY SECTION		
<u>Kevin Bennett</u> PRINTED NAME	 SIGNATURE	<u>962</u> BADGE
		<u>10/23/2019</u> DATE
REVIEWING SUPERVISOR SECTION		
 PRINTED NAME	 SIGNATURE	<u>535</u> BADGE
		<u>10/23/19</u> DATE

U-10.128A (5/2012)

Franklin County Sheriff's Office
Division of Corrections
Statement of Witness

CONSTITUTIONAL RIGHTS

Before we ask you any questions, you must understand your rights. (1.) You have the right to remain silent. (2.) Anything you say can be used against you in court. (3.) You have the right to talk to a lawyer for advice before we ask you any questions, and to have him present with you during questioning. (4.) If you are unable to pay a lawyer, a public defender will be appointed for you prior to any questioning, if you so desire. (5.) If you wish to answer questions now without a lawyer present, you have the right to stop answering questions at any time. (6.) You also have the right to stop answering at any time until you talk to a lawyer.

WAIVER

I have read the statement of my rights shown above. I understand what my rights are and I am willing to answer questions. I understand and know what I am doing. No promises or threats have been made to me, and no pressure of any kind has been used against me.

Signed this _____ day of _____, 19____, at FCCC I FCCC II (circle one) at _____ /M.

What is the highest level of education you attained? _____

Do you read and write? Yes ☐ No ☐

Do you wear glasses or contacts? Yes ☐ No ☐

Do you have a hearing problem? Yes ☐ No ☐

Witness _____

Witness _____ Signed _____

The person giving this statement is not suspected of committing a crime and was not advised of his/her rights. ☒

STATEMENT

I, DAVID WADE, do hereby make the following statement to Deputy N. BATES of my own free will and accord, concerning an incident that occurred at ~~FCCC I~~ FCCC II (circle one) on the day of August 22nd, 2019, at 1430 /M.

I was in the courtroom listening to the phone calls. I had on a stun belt around my waist when it just began shocking me continuously for between a minute and possibly a minute and a half. The deputies came to my aid and cut the belt off of me. I was treated medically.

I have read the above statement consisting of 1 pages and attest that it is a true and accurate account of the events which took place on August 22, 2019. It was given by me freely and voluntarily, without fear of threat or promise of reward.

Witness [Signature] Signed David Wade

Witness [Signature] Page 1 of 1 pages

Franklin County Sheriff's Office
Division of Corrections
Incident Report Photographs



Object description (if needed)

Overview of inmate

Inmate:	Wade, David #21090405113	
Taken by:	Dep. Bates #1199	
Time taken:	1334	
Date taken:	10-22-19	
2		3

Printed 10/22/2019

Exhibit A

Franklin County Sheriff's Office
Division of Corrections
Incident Report Photographs



Object description (if needed)

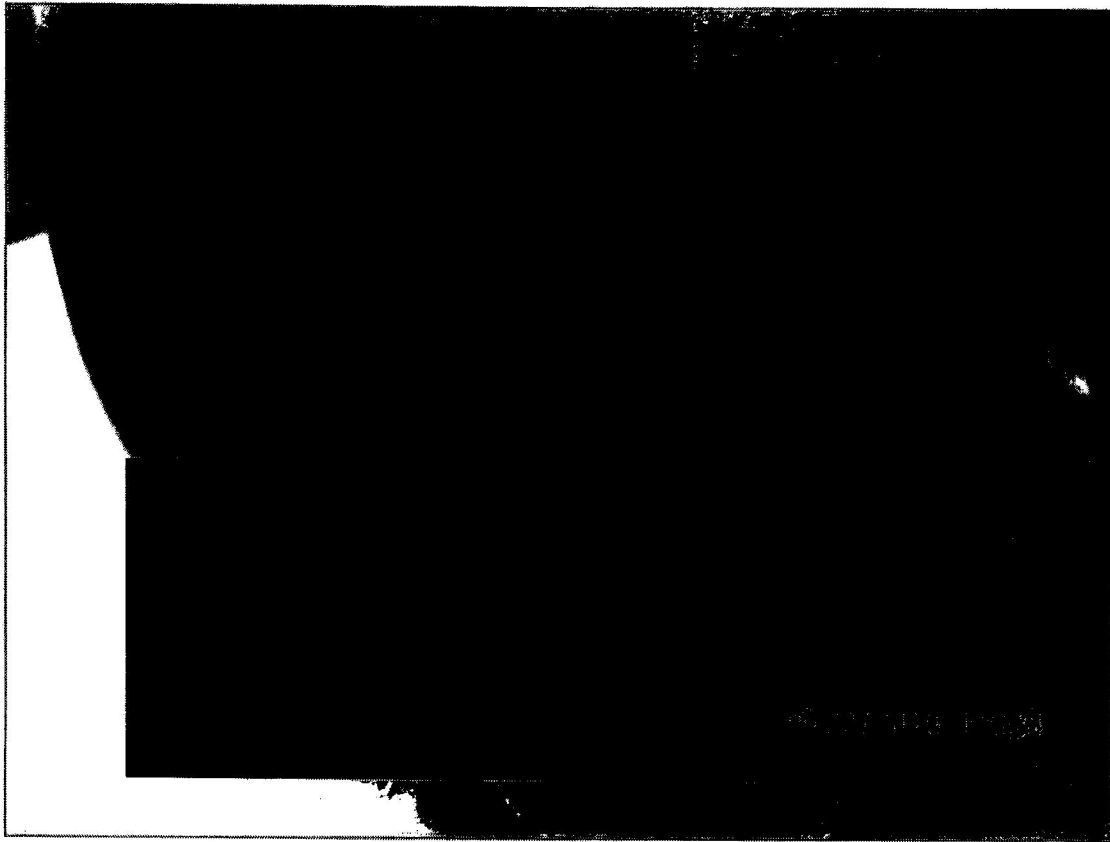
Overview of inmate

Inmate:	Wade, David #21090405113		
Taken by:	Dep. Bates #1199		
Time taken:	1334		
Date taken:	10-22-19		
		1 of 3	

Printed 10/22/2019

Exhibit A

Franklin County Sheriff's Office
Division of Corrections
Incident Report Photographs



Object description (if needed)

Overview of inmate

Inmate:	Wade, David #21090405113		
Taken by:	Dep. Bates #1199		
Time taken:	1334		
Date taken:	10-22-19		
		3	of 3

Printed 10/22/2019

Exhibit A

Inmate Name: **WADE, DAVID**SO #: **0378605**Booking #: **20190405113**Wednesday, October 23, 2019
2:13:56 PM**FRANKLIN COUNTY
LOCATOR CARD**Prisoner Type: **FELONY**

Bin#: 304	Height: 6 ft 01 in	Booking Location: FCCC1
Age: 40	Weight: 180	Incarceration Date 04/05/2019
DOB: 10/22/1979	Hair Color: BLK	Incarceration Tim 21:59
R/S: B/M	EyeColor: BRN	Assigned Housing: MJ-1-3-WL-06-01

ALERT DESCRIPTION:**ALERT NARRATIVE:**

1 20 SINGLE CELL HOUSING

2

3

OVER 3 ALERTS: ☐**KEEP SEPARATE FROM:**

0127597 - STEWARD, KEITH SONNY ; 0166118 - ABBOTT, JORDAN LAWRENCE ; 0401618 - LAWRENCE, RYAN WILLIAM ; 0058828 - HEISER-MULLINS, SEAN P

OVER 6 NAMES: ☐**Primary Charge Description**

Case #: Indict and Arraign Date: Commit Document: B.O. Date:

1 PROMOTING PROSTITUTION

6353

COMPLAINT

2 APA PAROLE HOLD

HOLDER

3 PROMOTING PROSTITUTION

19CR1984

4

5

6

Over 6 Cases: ☐**Alias Names:**

WADE, DAVID E - WADE, DAVID E

Over 8 Names: ☐

Hold Date/Time:

Hold by:

Hold Dept:

Hold Rem. Date/Time:

Hold Rem. By:

Hold Rem Dept:

1

2

3

Over 3 Holds: ☐**Housing:**

Pod:

Date:

Pod:

Date:

Pod:

Date:

Blanket: ☐Pillow Case: ☐Dress: ☐Underwear: ☐Mattress: ☐Sheet: ☐Pants: ☐PH Kit: ☐Pillow: ☐Towel: ☐Shirt: ☐Trustee Uniform/Footwear: ☐

Date/Time

I RECEIVED THE ABOVE LISTED ITEMS WHEN CONFINED IN THE Franklin County. I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY OF THESE ITEMS THAT MAY BE LOST OR DAMAGED. I FURTHER UNDERSTAND THAT STATE STATUTES PROHIBIT THE DAMAGING OF COUNTY PROPERTY AND IS PUNISHABLE BY STATE LAW.

Inmate

Witness

WADE, DAVID

B/M 10/22/1979

Pch

0378605



* 20190405113 *

Exhibit A



FRANKLIN COUNTY SHERIFF'S OFFICE

Sheriff Dallas Baldwin

MEMORANDUM

To: Deputy Nicholas Bates
From: Chief Deputy Michael Flynn
Date: October 25, 2019
Subject: Written Reprimand

COPY

This is to advise you that you are being issued a written reprimand as a result of violating the following rules and regulations:

- *102.9 Neglect or Inattention to Duty*
- *102.13 Care of Office Property*
- *102.29 Unbecoming Conduct*

On October 22, 2019, you and other deputies were in control of an inmate wearing a stun-belt. You left the courtroom to use the restroom and did not pass the stun-belt actuator to another deputy. While in the restroom you dropped the actuator in the toilet. After removing the actuator and attempting to dry it, the actuator activated causing the stun-belt to continuously cycle until the belt was cut off.

If such conduct continues, further disciplinary action will be taken which could result in your removal from service.

BY ORDER OF:

A handwritten signature in black ink, appearing to read "M. Flynn".

Chief Deputy Michael Flynn

ENTERED

☐ **Checked by Human Resources**

cc: Sheriff Baldwin
Major Oyer
Human Resources